

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/571277 FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2	1					
3	1					
4	1					
5	2					
6	2					
7	2					
8	1					
9	1					
10	2					
11	1					
12	1					
13	1					
14	1					
15	1					
16	1					
17	1					
18	1					
19	1					
20	1					
21	1					
22	1					
23	1					
24	1					
25	2					
26	①					
27	①					
28	2					
29	1					
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TOTAL IND.	19	8		8		8
TOTAL DEP.	19	8		8		8
TOTAL CLAIMS	38	8	8	8	8	8

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		8		8		8
TOTAL DEP.		8		8		8
TOTAL CLAIMS	38	8	8	8	8	8